



# Workbook: High-Risk Guidebook for Women

A Workbook to Accompany the High-Risk Guidebook for Women

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## Using this Workbook

This workbook was created to accompany the High-Risk Guidebook for Women. As you read through the Guidebook, keep this workbook nearby so that you can easily access it to answer the Critical Thinking Questions and Case Study questions. Take notes and talk with your trainer about these questions and anything else that comes to mind that might help you to become a more successful WIC RDN or MRN.

You will also have the chance to go through the case studies in a role play with your trainer or fellow RDNs and MRNs. This is great practice to incorporate PCS skills into your counseling and assessment of participants. Try to make these role playing exercises as real as possible, and discuss questions and concerns you have with your trainer when the role play is over.

If you and your trainer still have questions after discussing the situations, please contact your State Nutrition Consultant or the State Training Team.

## Module 2: Anthropometrics

### **101: Underweight**

1. What types of questions would you want to ask a pregnant woman who has high risk 101 to learn about her thoughts and feelings about being underweight? List your questions below.

### **111: Overweight**

1. Look through the resources provided in the Guidebook or at your clinic and decide what tips or support you can provide a postpartum woman who needs to lose weight. List your tips below.

## Module 3: The Clinical Codes 300s

### **335: Multifetal Gestation**

1. How can you assess how the mother is doing emotionally now that she is caring for two or more newborns? Why is this information important to your nutrition assessment?

### **342: Gastrointestinal Disorders**

1. How can you encourage and support a mom who had to stop breastfeeding due to medications that she has to take for her Crohn's disease?

### **345: Hypertension and Prehypertension**

1. A postpartum mom you see wants to follow the DASH diet. What information would you provide for her? How would you follow-up with this mom?

### **347: Cancer**

1. Fighting cancer is an exhausting battle. This is a perfect time to show compassion and sympathy for your participants. Throughout your conversation, how can you affirm her feelings about what she is going through while still achieving a goal or behavior change?

### **351: Inborn Errors of Metabolism (IEM)**

1. You see a mom with an IEM. She tells you that she monitors her condition and sees her medical team regularly. She tells you all about what she can and cannot eat and seems to be motivated to continue this lifestyle, even with the challenges of a new baby. She seems to be doing all the right things. How can you complete your nutrition assessment?

### **358: Eating Disorders**

1. How can you encourage the participant to open up and share the current status of their eating disorder?

## Module 4: Dietary Codes and the Concern with High-Risk Participants

### **427.2 Example:**

1. What grabs your attention about Crystal's chart (page XX in Guidebook)?
2. How do WIC codes 427.2 (Diet Very Low in Calories/Essential Nutrients) and 132 (Maternal Weight Loss During Pregnancy) relate?





## Case Studies

Work with your trainer and any other newly hired RDNs to go through this case study as a role play. Have the trainer be the participant and the new RDN go through a full high-risk assessment, including writing the note. Prompts will be given for the trainer to use, as they are playing the participant.

### 101: Underweight Case Study

#### General information

Brenda comes to you 16 weeks pregnant and underweight.

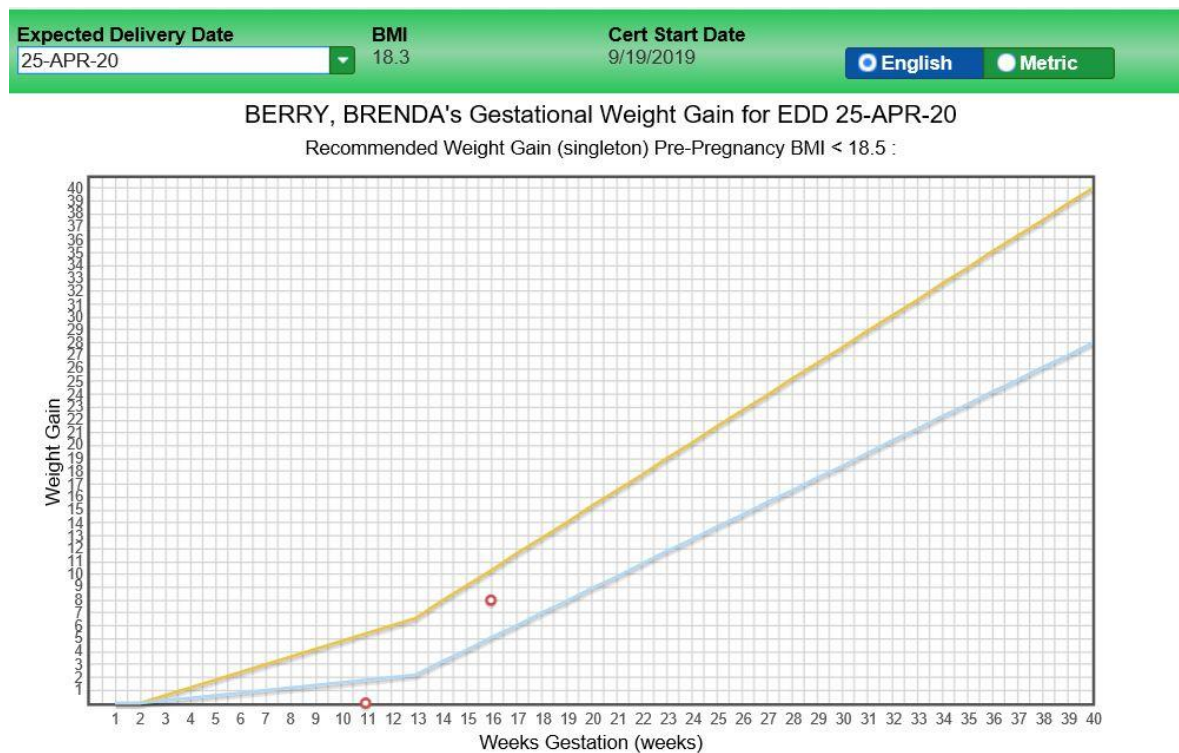
Pre-pregnancy weight: 117 lbs

Height: 5'7"

Weight at last appointment one month ago: 117 lbs

Current weight: 125 lbs

#### Medical Screen Graph



## Assessment

You open the conversation by telling Brenda that she has gained seven pounds since she was seen in the WIC office last month. She is happy to hear this and tells you that she has been really worried about not gaining enough weight and she is worried about the baby. She tells you that she had a lot of nausea and vomiting during the first 14 weeks of her pregnancy, so during that time it was hard to eat anything because nothing sounded good to her and she threw up so often. Now she is not vomiting but still has occasional bouts of nausea. Her doctor has encouraged her to gain more weight, so she tries to eat more ice cream, burgers and other not-so-healthy foods. Her doctor told her to eat whatever she could tolerate to help her gain weight. She is happy to finally be starting to gain some weight. After asking Brenda about her weight, she tells you that she is not sure how much weight she needs to gain, only that she hasn't gained enough so far. You talk to her about weight gain recommendations and she is surprised that she needs to gain so much weight. She is willing to do anything to gain the weight and have a healthy baby.

1. What other information regarding her diet and lifestyle would you like to know?
2. How can you explain pregnancy weight gain to Brenda? What resources can you use to show her how much weight she needs to gain?

3. How can you move the conversation from probing about her feelings, diet, and medical information to education and goal setting for Brenda?
4. What support and encouragement can you provide Brenda?
5. How should WIC follow-up with Brenda during her pregnancy?

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When you have finished role playing this scenario with your trainer, write your SOAP/ADIME note below.

Discussion Notes:

## 111: Overweight Case Study

### General Information

Jackie is an overweight postpartum mom and has a 4-week-old baby girl, Lucy.

Pre-pregnancy weight: 154 lbs

Current weight: 175 lbs

Height: 5'5"

Current BMI: 29.1

### Assessment

You decide to use the GTHM tools to open the conversation and offer Jackie the fabric swatches, asking her to “pick one that feels the way she is feeling about her postpartum body and her weight.” She chooses a fabric and tells you that it feels rough and that is how she is feeling about her weight, that is it hard for her to lose weight and she gets frustrated. She tells you that she is aware of being overweight and she has decided that she wants to become healthy for her baby so that she can run after Lucy once she is starting to walk and run around.

Jackie also tells you that she is starting to feel like she’s gotten the hang of being a mom now. She is trying to nurse the baby, but has started to supplement with formula and that is working out well for her. She is happy and looking forward to getting out of the house more, maybe even taking a trip to the grocery store (her mother has been shopping for her so far).

1. What else would you want to find out from Jackie at this point?

- \_\_\_\_\_

Continue from here by role playing with your trainer. You'll need to finish the assessment and then offer Jackie the nutrition education you think is most appropriate to help her reach her goals of losing weight and becoming healthier.

5. What if Jackie told you that she didn't have any concerns with her weight? How would you continue your assessment and eventually transition into behavior change?

When you have finished, write your SOAP/ADIME note below.

Discussion Notes:



## 131: Low Maternal Weight Gain Case Study

### General Information

Joyce is 24 weeks pregnant and has high risk 131 Maternal Weight Loss During Pregnancy.

Pre pregnancy weight: 145 lbs

Height: 5'8"

Weight at last WIC visit: 136 lbs

Current Weight: 140lbs

1. What are your thoughts after seeing Joyce's weight fluctuations throughout her pregnancy?

### Assessment

You decide to use GTHM tools to start your discussion with Joyce. You pull out the paint chip colors and ask Joyce, "Will you choose a color that says something to you about how your pregnancy and weight gain have been going?" Joyce picks yellow. You ask her what that color says about her pregnancy and weight gain, and Joyce responds, "I chose yellow because I feel like I am in a healthier place with my weight gain. I had a lot of morning sickness that lasted into my second trimester. But it has gone away for the most part and I am excited today to see that I have gained four pounds in the last month."



5. What education and information would you want to provide to help Joyce continue to gain weight and live healthy throughout her pregnancy and long after?
6. Instead of Joyce's weight being at 140 pounds, let's pretend that she weighed 135 pounds today for her high-risk appointment. How would this change your approach in your assessment and transition to behavior change?

When you have finished, write your SOAP/ADIME note below.

Discussion Notes:

## 302: Gestational Diabetes Case Study

## Assessment

You are seeing Trisha who is 30 weeks pregnant with gestational diabetes (GDM).

Trisha says that her doctor told her what she needs to eat and what she needs to avoid to control her GDM. Things to avoid, according to Trisha's doctor, include: sweets, desserts, candy, juice, soda, and anything with sugar. She goes on to say that she has tried to cut all these things out of her diet, but she still just wants to eat some stuff. She's never really liked vegetables so she is at a loss for what to eat.

1. What else do you want to know about Trisha's diagnosis and eating habits?
2. How can you explain to a pregnant woman with GDM what she should be eating?
3. What are some of the concerns that you would expect someone with GDM to have?



When you have finished, write your SOAP/ADIME note below.

Discussion Notes:

### 335: Multifetal Gestation Case Study

#### Assessment

Margaret is a 15-week pregnant mom-to-be of twins! You decide to start your assessment by using the doors tool from the GTHM toolkit. After asking Margaret what her hopes and dreams are for her babies, she responds, “For them to be healthy, happy, and reach their dreams.” You expertly transition her response to health and nutrition by saying, “Those are beautiful dreams to have for your babies.

Starting them out on a healthy lifestyle can set your babies up to successfully reach all that they dream about achieving one day. What are some of the things that you are doing now to create a healthy start for them?” Margaret answers that she is packing healthy snacks, like fruits, nuts and cheese to take with her during the day. She also walks most nights after dinner with her husband and their dog. You also ask what her doctor has said about her pregnancy and weight gain thus far. She tells you that her doctor has not mentioned healthy weight gain and Margaret wonders how much weight she should be gaining throughout her pregnancy.

1. What other information about Margaret’s eating habits would you want to know? How would you ask these questions to gain the most insight into her lifestyle?





6. How would you follow-up with Margaret during her pregnancy?

7. What encouragement can you give Margaret at this point in your assessment?  
How can you ask permission to give Margaret advice on breastfeeding her babies?

8. From what you have gathered above, what advice could you offer Margaret?

When you have finished, write your SOAP/ADIME note below.

Discussion Notes: